Floyd County Health Department
Telephone:812-948-4726

X6660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name			Telephone Number	Date of Inspection (mm/dd/yr)	PERMIT #
Tumbleweed			812 145-9333	12/4/2019	19-337

Establishment Address (number and street, city, state, zip code)
3005 Charlestown Crossing New Albany, IN 47150 | 502 618 8357

Owner	Purpose:	Follow-up	Release Date
TW- Indiana, llc	1. Routine (circled)	No	10 days

Owner's Address
2301 River Rd (Suite 200) Louisville, KY 40206

Purpose:
2. Follow-up
3. Complaint
4. Pre-Operational
5. Temporary
6. HACCP
7. Other (list)

Person in Charge
Eric Long

Responsible Person's E-mail

Summary of Violations:

C ___ NC 6 R 1

Menu Type *(See back of page)*

1 ___ 2 ___ 3 X 4 ___ 5 ___

Certified Food Manager
Eric Long (3/15/22)

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
217	NC		Observed (2) cutting boards needing resurfaced or replaced	Today
245	NC		Observed rags outside of sanitizer solution in kitchen	Today
347	NC		Observed hand towels out at kitchen hand sink	Today
399	NC		Observed warewash hand sink loose from wall	1 week
430	NC	R	Observed (2) molding ceiling tiles over bar	1 week
431	NC		Observed BOH ceiling to be soiled and needing cleaned	

Received by (name and title printed):

Inspected by (name and title printed):
A.J. Ingram (EHS)

Received by (signature):

Inspected by (signature):
aj

cc: | cc: | cc: